2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

S74354 **DOCUMENT #**



Mar 07, 2003 8:00 am & Secretary of State **FILED**

1. Entity Name TTA CERTIFIED PROCESS SERVERS, INC.				03-07-2003 90082 022 ***150.00			
2100 W. 76 S #409 HIALEAH FL	33016 Place of Business	Mailing Address 2100 W. 76 STREET #409 HIALEAH FL 33014 3. Mailing Address 6235 W.	ilo Avenue				
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING	G CHANGES		
City & Stat	in Fr	THINEIT !	て	4. FEI Number 65-0282965	——————————————————————————————————————	pplied For ot Applicable	ı
3301		33012	Country USA .	5. Certificate of Status Desired	\$8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered	Agent		
T44444	TOLIN		Name			- سبب	
TAMAYO, TONY 8014 WEST 18TH CT. HIALEAH FL 33014			Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
			City	FL	Zip Cod	le	
8. The above	e named entity submits this statement fo	r the purpose of changing its r	egistered office or regi	stered agent, or both, in the State of Florida. I am	familiar with,	and accept	
SIGNATURE .	Marie Jama			3.4-7	3.		
	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE:	Registered Agent signature req	uired when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				Election Campaign Financing Trust Fund Contribution.		00 May Be d to Fees	
		State					
Make Check	k Payable to Florida Department of		I 11	ADDITIONS/CHANGES TO DESICERS AND	DIRECTOR	S IN 11	
		DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND			ć
Make Check	P (A TAMAYO, TONY)		11. TITLE NAME	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR:	S IN 11	(00/04)
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP